# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate lev	el produced by rate revision effective	11/01/2013
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage		
11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other	785,502	+1.3%
Does filing only apply to certain territory (te Brief description of filing. (If filing follows ra General Liability and will revise rates to E Liability and will revise rates to Wrongful A	ites of an advisory organization, specify or imergency Service Organizations; also ap	ganization): This filing applies to GPP
*Adjusted to reflect all prior rate changes. **Change in Company's premium level whi	American Alter	native Insurance Corporation Name of Company
	Style J. Chitch	

Stephen Corbett, Head of Insurance Company Operations
Official – Title

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level	produced by rate revision effective	11/01/2013
(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois)*	Change (+ or -)**
Automobile Liability Private		
Passenger Commercial		
Automobile Physical Damage     Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5 Gloop		
6. Fidelity		
7. Surety		
Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril	4,857,799	+2.3%
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain territory (terr	itories) or certain classes? If so, specif	y: <u>No</u>
Brief description of filing. (If filing follows ra		
VI 13 Warragement Elability and 1 Ortable Eg	dipriment and will revise sase raises.	
*Adjusted to reflect all prior rate changes. **Change in Company's premium level whicl	n will result from application of new rate	9S.
	American Alte	ernative Insruance Corporation  Name of Company
		Trains of company

Stephen Corbett, Head of Insurance Company Operations
Official – Title

#### ILLINOIS DEPARTMENT OF INSURANCE **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective 7/1/2013 (3) (2) (1) **Percent Annual Premium** Change (+ or -)\*\* Volume (Illinois)\* Coverage Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. **Burglary and Theft** 5. Glass Fidelity 6. 7. Surety 8. **Boiler and Machinery** 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 25.0% 13. Commercial Multi-Peril 2,229,719 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are revising the rate of the Connect product. Please see the filing memo for more details. \*Adjusted to reflect all prior rate changes. \*\*Change in Company's premium level which will result from application of new rates.

American Casualty Company of Reading

Name of Company

DUMMA Klis FLAS, MAAA AVP + actually

#### FORM (RF-3)

#### **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective  ${\tt October\ 15,\ 2013\ New\ Business,\ January\ 15,\ 2014\ Renewal}$  .

~	(1)	(2) Annual Premium	(3) Percent
4	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
_	Commercial		
2	Automobile Physical Damag		•
	Private Passenger		
_	Commercial		
3.	Liability Other Than Auto		
<b>4</b> .	Burglary and Theft		
5.	Glass		
6. <del>-</del>	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	\$342,206	+14.7%
14.	Crop Hail		
15.	Other		-
	Line of Insurance		
	Does filing only apply to certa Classes? If so, specify: No, This	in territory (territories) or o	
	3pccny. <u>100, 1711.</u>	o d d dilango to an tilo rato on	and terminy.
	Brief description of filing. (If fi Organization, specify	ling follows rates of an ac	lvisory
	organization):	We propose to revise our	base rates in all markets segments.
	We also propose to revise our Fune	ral Directors from \$4 to \$5 and	our Optometrist rate from
	\$750 to \$862.50.		
	*Adjusted to reflect all prior ra  **Change in Company's prem		from application of new
	rates.	_	

Assurance Company of America

Name of Company

Jennifer Atilano - Regulatory Services Analyst

Official - Title

Change in Company's premium or rate level produced by rate revision effective 11/01/13 New and Renewals (3) Annual Premium Percent Change (+ or -) \*\* Volume (Illinois) \* Coverage 1. Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril \$4,798,634 4.3% 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Revise Property and Liability base rates, Premium Size Credit, Protection Class / Construction Type Factors, Professional Liability Rates, Swimming Pool Rates, Spoilage Rates, and Utility Service Rates. \* Adjusted to reflect all prior rate changes. \*\* Change in Company's premium level which will result from application of new rates. Citizens Insurance Company of America Name of Company Gregory A. Popolizio, Senior State Filing Analyst

Official - Title

H29219D

Change in Company's premium or rate level produced by rate revision effective $\frac{11}{01}$ New and Renewals			
(1)	(2) Annual Premium	(3) Percent	
<u>Coverage</u>	Volume (Illinois) *	<u>Change (+ or -)**</u>	
1. Automobile Liability Private Passenger			
Commercial  2. Automobile Physical Damage Private Passenger			
Commercial	· · · · · · · · · · · · · · · · · · ·		
3. Liability Other Than Auto			
4. Burglary and Theft 5. Glass			
6. Fidelity			
7. Surety			
8. Boiler and Machinery			
9. Fire			
10. Extended Coverage			
11. Inland Marine			
12. Homeowners  13. Commercial Multi-Peril	\$3,039,050	4.4%	
14. Crop Hail	\$3,039,030	4.470	
15. Other			
Line of Insurance			
Does filing only apply to certain territory (territories)or certain classes? If so, specify: No			
Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Revise Property and Liability base rates, Premium Size Credit, Protection Class / Construction Type Factors, Professional Liability Rates, Swimming Pool Rates, Spoilage Rates, and Utility Service Rates.			
* Adjusted to reflect all prior ra ** Change in Company's premium leve result from application of new r	l which will		
	Citizens Insurance Comp		
<del></del>	Name of Compa	any	

Gregory A. Popolizio, Senior State Filing Analyst
Official - Title

H29219D

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 7/1/2013 (3)(2) (1) **Percent Annual Premium** Change (+ or -)\*\* Volume (Illinois)\* Coverage Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto Burglary and Theft 4. 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 25.0% 1,852,068 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are revising the rate of the Connect product. Please see the filing memo for more details. \*Adjusted to reflect all prior rate changes. \*\*Change in Company's premium level which will result from application of new rates. Continental Casualty Company Name of Company DUSAMOREL FCASMARA AVE + actuary

Cha	ange in Company's premium or rate lev	rel produced by rate revision effective	10-1-13 / 12-1-13
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private		
	Passenger Commercial		
2.	Automobile Physical Damage		
	Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
	Extended Coverage		
	Inland Marine		
	Homeowners	447.000	0.40/
	Commercial Multi-Peril	147,226	3.1%
	Crop Hail		
15.	OtherLine of Insurance		
	Line of insurance		
Dos	es filing only apply to certain territory (te	erritories) or certain classes? If so, specify:	
No	to contain termory (to	interior, or contain diaceter. In co, opening.	
		ates of an advisory organization, specify org	anization):
We	are adopting ISO Rule and revising	factors.	
<b>.</b>			
	ljusted to reflect all prior rate changes.	ich will recult from application of new rates	
C	nange in Company's premium level wh	ich will result from application of new rates.	
		GuideOne America Insuranc	e Company
			ame of Company
		Joseph Highbarger, FCAS, M	
			Official – Title

Change in Company's premium or rate I	evel produced by rate revision effective	10-1-13 / 12-1-13
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
<ol> <li>Automobile Liability Private         Passenger Commercial</li> <li>Automobile Physical Damage         Private Passenger Commercial</li> <li>Liability Other Than Auto</li> <li>Burglary and Theft</li> <li>Glass</li> <li>Fidelity</li> <li>Surety</li> <li>Boiler and Machinery</li> <li>Fire</li> <li>Extended Coverage</li> <li>Inland Marine</li> </ol>		
<ul> <li>12. Homeowners</li> <li>13. Commercial Multi-Peril</li> <li>14. Crop Hail</li> <li>15. Other</li></ul>	(territories) or certain classes? If so, specify:	6.9%
Brief description of filing. (If filing follows We are adopting ISO Rule and revisin	rates of an advisory organization, specify org g factors.	
*Adjusted to reflect all prior rate changes **Change in Company's premium level v	s.  which will result from application of new rates.  GuideOne Elite Insurance	
		MAAA - AVP/Actuary  Official – Title

Ch	ange in Company's premium or rate le	vel produced by rate revision effective	10-1-13 / 12-1-13
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private		
	Passenger Commercial		
2.	Automobile Physical Damage		<del>-</del>
	Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril	5,804,030	5.5%
	Crop Hail		
15.	Other		•
	Line of Insurance		
Do	es filing only apply to certain territory (t	erritories) or certain classes? If so, specify:	
No		contain diageous. If ou, speakly.	
Brie	ef description of filing. (If filing follows r	ates of an advisory organization, specify orga	anization):
We	are adopting ISO Rule and revising	factors.	
	ljusted to reflect all prior rate changes.		
**C	hange in Company's premium level wh	nich will result from application of new rates.	
		0.11.0	
		GuideOne Mutual Insurance	amo of Company
		Na · · ·	ame of Company
		Joseph Highbarger, FCAS; M	10.00 - 0\/P/0.ctuppy
			Official – Title
			Onidai – Tille

Cha	ange in Company's premium or rate lev	el produced by rate revision effective	10-1-13 / 12-1-13
	(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private		
_	Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft	-	
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril	525,495	5.8%
	Crop Hail		
15.	Other		
	Line of Insurance		
<b>.</b>		-itarias) as as dain alassas Olfan annaifu	
	es filing only apply to certain territory (te	rritories) or certain classes? If so, specify:	
No			
Dric	of description of filing. (If filing follows ra	tes of an advisory organization, specify orga	anization):
	are adopting ISO Rule and revising f		
000	are adopting 100 Kale and revising i	actors.	
hA*	justed to reflect all prior rate changes.		
		ch will result from application of new rates.	
•	nango m o ompany o promam coron		
		GuideOne Specialty Mutual I	nsurance
			ame of Company
		Joseph Highbarger, FCAS, N	IAAA - AVP/Actuary
			Official – Title

Change in Company's premiurevision effective $11/01/1$	m or rate level produced 3 New and Renewals	by rate
(1)	(2)	(3) Percent
<u>Coverage</u>	Annual Premium Volume (Illinois)*	Change (+ or -) **
<ol> <li>Automobile Liability Private Passenger</li> </ol>		
Commercial		
<ol> <li>Automobile Physical Damage Private Passenger</li> </ol>		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	#2.1(0.7F(	4.20/
13. Commercial Multi-Peril 14. Crop Hail	\$3,160,756	4.2%
15. Other		
Line of Insurance		
Hine of Insulance		
Does filing only apply to certain If so, specify: No	territory (territories)or	c certain classes?
Brief description of filing. (If organization, specify organization Size Credit, Protection Class / Construct	1): Revise Property and Lial	bility base rates, Premium
Pool Rates, Spoilage Rates, and Utility S	Service Rates	Lidency reaces/ Swittming
- Poor Rates, Sponage Rates, and Gamey C	or vice Nates.	
* Adjusted to reflect all prior r ** Change in Company's premium lev result from application of new	vel which will	
	The Hanover Insurance	
	Name of Compa	ny

Gregory A. Popolizio, Senior State Filing Analyst
Official - Title

H29219D

## FORM (RF-3)

Change in Company's premium or ra	ate level produced by rate revision
effective 10/1/2013	

-	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
	Commercial		
2	Automobile Physical Damag		
	Private Passenger		•
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		And the second s
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	\$312,484	+13%
14.	Crop Hail		-
15.	Other		
	Line of Insurance		
	Does filing only apply to certa Classes? If so.	in territory (territories) or	certain
	,	applies statewide	
	Brief description of filing. (If fi	ling follows rates of an a	dvisory
	Organization, specify		•
	organization):	We are taking a 13% base	rate increase on our Bldg/BPP rates.
	See Supporting Documentation tab for in	ndications.	
	*Adjusted to reflect all prior ra		
	**Change in Company's prem	iium level which will resu	It from application of new
	rates.		
		Hastings Mutual In	
			me of Company
		Agnes Karas Produ	
		(	Official – Title

## FORM (RF-3)

Change in Company's prem	nium or rate level <mark>j</mark>	produced by rate revision
effective October 1, 2013	_	

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
	Automobile Liability Private Passenger	Volume (minors)	endinge (* o. /
	Commercial	**************************************	
	Automobile Physical Damag		
	Private Passenger		*
	Commercial		
	Liability Other Than Auto		
	Burglary and Theft		The state of the s
	Glass		
	Fidelity		
	Surety		
	Boiler and Machinery		
	Fire		0.000
0.	Extended Coverage		
1.	Inland Marine		
2.	Homeowners		
3.	Commercial Multi-Peril	\$177,188	-5.08%
4. 5.	Crop Hail	<u> </u>	
J.	Other Line of Insurance		
	Line of insurance		
•	Does filing only apply to certa	in territory (territories) or	certain
	Classes? If so,		(x,y) = (x,y) + (x,y
	specify: NA NA		
	(a. a	, v =	
	Brief description of filing. (If f	iling follows rates of an a	dvisory
	Organization, specify		
	organization):	We are revising the rates t	for all classes of business.
	*Adjusted to reflect all prior ra		It from application of now
	**Change in Company's prem	num lever which will resul	it from application of new
	rates.	Iowa American Ins	urance Company
			me of Company
		Beverly Barber-Con	
			Official Title

1.

2

3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14.

## Section 754.EXHIBIT A Summary Sheet (Form RF-3)

## FORM (RF-3)

| Change in Company's p     | remium or rate level produced by | y rate revision |
|---------------------------|----------------------------------|-----------------|
| effective October 1, 2013 | ,                                |                 |

| (1)   | (2)<br>Annual Premium                  | (3)<br>Percent   |
|---|--|--|
| Coverage  | Volume (Illinois) *                    | Change (+or-) **   |
| Automobile Liability Private                                  |  | And the second s |
| Passenger   |  |  |
| Commercial  |  |  |
| Automobile Physical Damag                                     |  |  |
| Private Passenger   |  | •  |
| Commercial  |  |  |
| Liability Other Than Auto                                     |  |  |
| Burglary and Theft  |  |  |
| Glass   |  |  |
| Fidelity  |  |  |
| Surety  |  |  |
| Boiler and Machinery  |  |  |
| Fire  |  |  |
| Extended Coverage   |  |  |
| Inland Marine   | 2                                      |  |
| Homeowners  |  |  |
| Commercial Multi-Peril  | \$488,748                              | -5.08%   |
| Crop Hail   |  |  |
| Other   |  |  |
| Line of Insurance   |  |  |
| Does filing only apply to certa Classes? If so, specify: NA   | in territory (territories) or          | certain  |
| Brief description of filing. (If fi                           | ling follows rates of an ac            | lvisorv  |
| Organization, specify   | ming tono 415 rates of all ac          |  |
| organization):  | We are revising the rates for          | or all classes of business.  |
|   |  |  |
|   |  |  |
| *Adjusted to reflect all prior ra  **Change in Company's prem |  | from application of new  |
| rates.  | Iowa Mutual Insura                     | nce Company  |
|   | ************************************** | ne of Company  |
|   | Beverly Barber-Com                     | • •  |
|   |  | Official - Title   |

FORM (RF-3)

### SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective October 15, 2013 New Business, January 15, 2014 Renewal.

| -      | (1)   | (2) Annual Premium            | (3) Percent                         |
|--------|---|-------------------------------|-------------------------------------|
| 1.     | Coverage Automobile Liability Private                                     | Volume (Illinois) *           | Change (+or-) **                    |
| ١.     | Passenger   |                               |                                     |
|        | Commercial  |                               |                                     |
| 2      | Automobile Physical Damag   |                               |                                     |
| _      | Private Passenger   |                               | •                                   |
|        | Commercial  | <u></u>                       |                                     |
| 3.     | Liability Other Than Auto   |                               |                                     |
| 4.     | Burglary and Theft  |                               |                                     |
| <br>5. | Glass   |                               |                                     |
| 3.     | Fidelity  |                               |                                     |
| 7.     | Surety  | <del></del>                   |                                     |
| 3.     | Boiler and Machinery  |                               |                                     |
| €.     | Fire  |                               |                                     |
| 10.    | Extended Coverage   |                               |                                     |
| 11.    | Inland Marine   |                               |                                     |
| 12.    | Homeowners  |                               |                                     |
| 13.    | Commercial Multi-Peril  | \$443,132                     | +11.7%                              |
| 14.    | Crop Hail   |                               |                                     |
| 15.    | Other   |                               |                                     |
|        | Line of Insurance   |                               |                                     |
|        | Does filing only apply to certain Classes? If so, specify:  No, This      | in territory (territories) or |                                     |
|        | Brief description of filing. (If fi                                       | ling follows rates of an ag   | tvisorv                             |
|        | Organization, specify   | mig follows rates of air at   | 2 V. 6 G. Y                         |
|        | organization):  | We propose to revise our      | base rates in all markets segments. |
|        | We also propose to revise our Funer                                       |                               |                                     |
|        | \$750 to \$862.50.  |                               |                                     |
|        | *Adjusted to reflect all prior ra<br>**Change in Company's prem<br>rates. |                               | t from application of new           |
|        |   | Maryland Casual               | ty Company                          |
|        |   | Nar                           | ne of Company                       |
|        |   | Jennifer Atilano - Re         | egulatory Services Analyst          |

Official - Title

| revision effective 11/01/1                         | 3 New and Renewals                   |                              |
|--|--------------------------------------|------------------------------|
| (1)  | (2)<br>Annual Premium                | (3)<br>Percent               |
| <u>Coverage</u>                                    | <u>Volume (Illinois)*</u>            | <u>Change (+ or -)**</u>     |
| 1. Automobile Liability Private Passenger          |                                      |                              |
| Commercial   |                                      |                              |
| 2. Automobile Physical Damage<br>Private Passenger |                                      |                              |
| Commercial   |                                      |                              |
| 3. Liability Other Than Auto                       |                                      |                              |
| 4. Burglary and Theft                              |                                      |                              |
| 5. Glass   |                                      |                              |
| 6. Fidelity  |                                      |                              |
| 7. Surety  |                                      |                              |
| 8. Boiler and Machinery                            |                                      |                              |
| 9. Fire  |                                      |                              |
| •  | ··-                                  |                              |
| 10. Extended Coverage                              |                                      |                              |
| 11. Inland Marine                                  |                                      |                              |
| 12. Homeowners                                     |                                      | · <u></u>                    |
| 13. Commercial Multi-Peril                         | \$1,068,931                          | 4.8%                         |
| 14. Crop Hail                                      |                                      |                              |
| 15. Other  |                                      |                              |
| Line of Insurance                                  |                                      |                              |
|  |                                      |                              |
| Does filing only apply to certain                  | territory (territories)o             | r certain classes?           |
| If so, specify: No                                 | •                                    |                              |
|  |                                      |                              |
|  |                                      |                              |
|  |                                      |                              |
| Brief description of filing. (If                   | filing follows rates of              | an advisory                  |
| organization, specify organization                 |                                      |                              |
| Size Credit, Protection Class / Construct          | <u>ion Type Factors, Professiona</u> | al Liability Rates, Swimming |
| Pool Rates, Spoilage Rates, and Utility S          |                                      |                              |
|  |                                      |                              |
| * Adjusted to reflect all prior r                  | ate changes                          |                              |
| ** Change in Company's premium lev                 | el which will                        |                              |
| result from application of new                     | rates.                               |                              |
|  |                                      |                              |
|  |                                      |                              |
|  | Managara Barra Barra Tangung         | ana Camanani                 |
|  | Massachusetts Bay Insura             | ance Company                 |
|  | Name of Compa                        | any                          |
|  |                                      |                              |
|  |                                      |                              |
|  | Gregory A. Popolizio, Senior Sta     | ate Filing Analyst           |
|  | Gregory A. Popolizio, Senior Sta     | tle                          |
| H29219D  |                                      |                              |

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 7/1/2013 (3) (2)(1) Percent **Annual Premium** Change (+ or -)\*\* Volume (Illinois)\* **Coverage** Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. **Burglary and Theft** 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 25.0% 13. Commercial Multi-Peril 2,313,185 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are revising the rate of the Connect product. Please see the filing memo for more details. \*Adjusted to reflect all prior rate changes. \*\*Change in Company's premium level which will result from application of new rates. National Fire Insurance Company of Hartford Name of Company FLASMAAA AUP + actuary

Official - Title

### FORM (RF-3)

#### **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective October 15, 2013 New Business, January 15, 2014 Renewal .

| -   | (1)  | (2) Annual Premium   | (3) Percent                         |
|-----|--|--|-------------------------------------|
| 1.  | Coverage   | Volume (Illinois) *  | Change (+or-) **                    |
| 1.  | Automobile Liability Private                                 |  |                                     |
|     | Passenger<br>Commercial                                      |  |                                     |
| 2   | Automobile Physical Damag                                    |  |                                     |
| _   | Private Passenger  |  | •                                   |
|     | Commercial   |  |                                     |
| 3.  | Liability Other Than Auto                                    |  |                                     |
| 4.  | Burglary and Theft   |  |                                     |
| 5.  | Glass  |  |                                     |
| 6.  | Fidelity   |  |                                     |
| 7.  | Surety   |  |                                     |
| 8.  | Boiler and Machinery   |  |                                     |
| 9.  | Fire   |  |                                     |
| 10. | Extended Coverage  | **************************************   |                                     |
| 11. | Inland Marine  |  |                                     |
| 12. | Homeowners   |  |                                     |
| 13. | Commercial Multi-Peril                                       | \$51,352   | +8.0%                               |
| 14. | Crop Hail  |  |                                     |
| 15. | Othe <u>r</u>  |  |                                     |
|     | Line of Insurance  |  |                                     |
|     | Does filing only apply to certa Classes? If so,              |  |                                     |
|     | specify: No, Thi   | s is a change to all the rate cl   | ass and territory.                  |
|     | Brief description of filing. (If for Organization, specify   | iling follows rates of an ac   | dvisory                             |
|     | organization):   | We propose to revise our   | base rates in all markets segments. |
|     | We also propose to revise our Fune                           |  |                                     |
|     | \$750 to \$862.50.   |  |                                     |
|     | *Adjusted to reflect all prior ra **Change in Company's prem |  | t from application of new           |
|     | rates.   | N. I. and In a construction of the constructio | O                                   |

Northern Insurance Company of New York

Name of Company

Jennifer Atilano - Regulatory Services Analyst

Official - Title

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 7/1/2013 (2) (3)(1) Percent **Annual Premium** Change (+ or -)\*\* Volume (Illinois)\* Coverage Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. **Burglary and Theft** 5. Glass 6. Fidelity 7. Surety 8. **Boiler and Machinery** 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 25.0% 1,282,746 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are revising the rate of the Connect product. Please see the filing memo for more details. \*Adjusted to reflect all prior rate changes. \*\*Change in Company's premium level which will result from application of new rates.

Transportation Insurance Company

Name of Company

DUMAN OF KLO FCAS MAAA AVP& actuary
Official - Title

| (        | Change in Company's premium or rat   | te level produced by rate revision effecti  | ve New Business: 9/23/2013<br>Renewal Business: 1/20/2014 |
|----------|--|---|---|
|          | (1)  | (2) Annual Premium                          | (3) Percent Change (+ or -)**                             |
|          | <u>Coverage</u>  | Volume (Illinois)*                          | Change (+ or -)   |
| 1.       | Automobile Liability   |   |   |
|          | Private Passenger  |   |   |
|          | Commercial   |   |   |
| 2.       | Automobile Physical Damage<br>Private Passenger                                |   |   |
| •        | Commercial   |   |   |
| 3.       | Liability Other Than Auto  |   |   |
| 4.       | Burglary and Theft Glass   |   |   |
| 5.<br>6. | Fidelity   |   |   |
| 0.<br>7. | Surety   |   |   |
| 8.       | Boiler and Machinery   |   |   |
| 9.       | Fire   |   |   |
| 10.      | Extended Coverage  |   |   |
| 11.      | Inland Marine  |   |   |
| 12.      | Homeowners   |   |   |
| 13.      | Commercial Multi-Peril   | \$30,981                                    | +1.0%   |
| 14.      | Crop Hail  |   |   |
| 15.      | Other  |   |   |
|          | Line of Insurance  |   |   |
| Does f   | iling only apply to certain territory (t                                       | erritories) or certain classes? If so, spec | ifv:  |
| Liabi    | lity increases/decreases apply to all I  | SO Territories.                             |   |
|          |  |   |   |
|          |  |   |   |
|          |  | s rates of an advisory organization, spec   |   |
| _Modi    | ification of Loss Cost Multipliers to a  | llign with (for-profit) General Package p   | roduct  |
|          |  |   |   |
|          |  |   |   |
| * 4.     | divoted to reflect all prior rate change                                       |   |   |
|          | djusted to reflect all prior rate change<br>hange in Company's premium level w |   |   |
|          | sult from application of new rates.  | Allen will                                  |   |
|          | out nom uppnounce or new tures   |   |   |
|          |  |   |   |
|          |  |   |   |
|          |  | <u>U</u> :                                  | nited States Liability Ins. Co.                           |
|          |  |   | Name of Company   |
|          |  |   |   |
|          |  | Α   | lam Steficek, Senior Actuarial                            |
|          |  |   | nalyst  |
|          |  |   | Official - Title  |

|           | Change in Company's premium or rate  | e level produced by rate revision effecti   | New Business: 10/21/2013<br>Renewal Business: 2/15/2014 |
|-----------|--|---|---|
|           | (1)  | (2)<br>Annual Premium   | (3)<br>Percent  |
|           | <u>Coverage</u>  | Volume (Illinois)*  | <u>Change (+ or -)**</u>                                |
| 1.        | Automobile Liability   |   |   |
|           | Private Passenger  |   |   |
|           | Commercial   |   |   |
| 2.        | Automobile Physical Damage<br>Private Passenger  |   |   |
|           | Commercial   |   |   |
| 3.        | Liability Other Than Auto  |   |   |
| 4.        | Burglary and Theft   |   |   |
| 5.        | Glass  |   |   |
| 6.        | Fidelity   |   |   |
| 7.        | Surety   |   |   |
| 8.        | Boiler and Machinery   |   |   |
| 9.<br>10. | Fire Extended Coverage   |   |   |
| 10.       | Inland Marine  |   |   |
| 12.       | Homeowners   |   |   |
| 13.       | Commercial Multi-Peril   | \$104,161   | +2.5%   |
| 14.       | Crop Hail  | ψ10 1,101   |   |
| 15.       | Other  |   |   |
| 10.       | Line of Insurance  |   |   |
| Liabi     | lity increases/decreases apply to all IS   | rritories) or certain classes? If so, speci<br>SO Territories with adoption of Loss Co<br>rates of an advisory organization, speci<br>ign with (for-profit) General Package p | sts, ILFs, and LCMs.  fy organization):                 |
|           |  |   |   |
|           |  |   |   |
| ** C      | djusted to reflect all prior rate changes thange in Company's premium level we sult from application of new rates. |   |   |
|           |  |   |   |
|           |  | Ui  | nited States Liability Ins. Co.                         |
|           |  |   | Name of Company   |
|           |  |   | am Steficek, Senior Actuarial                           |
|           |  |   | Official - Title  |

Official - Title

|        | Change in Company's premium or rate  | e level produced by rate revision effective  | e 9/23/2013 (new);<br>12/23/2013 (renewal) |
|--------|--|--|--|
|        | (1)  | (2)<br>Annual Premium  | (3) Percent                                |
|        | <u>Coverage</u>  | Volume (Illinois)*   | <u>Change (+ or -)**</u>                   |
| 1.     | Automobile Liability   |  |  |
|        | Private Passenger  |  |  |
|        | Commercial   |  |  |
| 2.     | Automobile Physical Damage   |  |  |
|        | Private Passenger  |  |  |
|        | Commercial   |  |  |
| 3.     | Liability Other Than Auto  |  |  |
| 4.     | Burglary and Theft   |  |  |
| 5.     | Glass  |  |  |
| 6.     | Fidelity   |  |  |
| 7.     | Surety   |  |  |
| 8.     | Boiler and Machinery   |  |  |
| 9.     | Fire   |  |  |
| 10.    | Extended Coverage  |  |  |
| 11.    | Inland Marine  |  |  |
| 12.    | Homeowners   |  |  |
| 13.    | Commercial Multi-Peril   | \$2,870,024  | 1.6%                                       |
| 14.    | Crop Hail  |  |  |
| 15.    | Other  |  |  |
|        | Line of Insurance  |  |  |
| Does f | filing only apply to certain territory (ter<br>We are filing Loss Cost Multiplier de | rritories) or certain classes? If so, specific creases for Bars which are ISO GL Terri | y:<br>tory dependent.                      |
|        | 8  |  |  |
| Drief  | description of filing. (If filing follows  | rates of an advisory organization, specif  | v organization):                           |
| Wea    | are filing Loss Cost Multiplier decrease   | es for Bars.   | y Organization).                           |
|        | are also filing Property Territory Multip  |  |  |
|        |  |  |  |
| * A    | djusted to reflect all prior rate changes  |  |  |
| ** C   | hange in Company's premium level wh  | nich will  |  |
| re     | sult from application of new rates.  |  |  |
|        |  |  |  |
|        |  |  |  |
|        |  | I Ini  | ted States Liability Ins. Co.              |
|        |  |  | Name of Company                            |
|        |  |  | rame of Company                            |
|        |  |  |  |
|        |  | Ada<br>Ana   | m Steficek, Senior Actuarial               |

1.

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3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14.

#### Section 754.EXHIBIT A Summary Sheet (Form RF-3)

#### FORM (RF-3)

#### SUMMARY SHEET

| (1)                             | (2)<br>Annual Premium                 | (3)<br>Percent   |
|---------------------------------|---------------------------------------|------------------|
| Coverage                        | - Volume (Illinois) *                 | Change (+or-) ** |
| Automobile Liability Private    |                                       |                  |
| Passenger                       |                                       |                  |
| Commercial                      |                                       |                  |
| Automobile Physical Damag       |                                       |                  |
| Private Passenger               |                                       |                  |
| Commercial                      |                                       |                  |
| Liability Other Than Auto       |                                       |                  |
| Burglary and Theft              |                                       |                  |
| Glass                           |                                       |                  |
| Fidelity                        |                                       |                  |
| Surety                          |                                       |                  |
| Boiler and Machinery            |                                       |                  |
| Fire                            |                                       |                  |
| Extended Coverage               |                                       |                  |
| Inland Marine                   |                                       |                  |
| Homeowners                      |                                       |                  |
| Commercial Multi-Peril          | \$30,000                              | 3%               |
| Crop Hail                       |                                       |                  |
| Other Earthquake                | · · · · · · · · · · · · · · · · · · · |                  |
| Line of Insurance               |                                       |                  |
| Does filing only apply to certa | ain territory (territories) or        | certain          |
| Classes? If so,                 |                                       |                  |
| specify: All clas               | ses but only to earthquake cov        | verage rates     |

Organization, specify

organization):

Name of Company
Steven J. Burmeister - Underwriter

Official - Title

An adjustment, increase to the earthquake rates.

<sup>\*</sup>Adjusted to reflect all prior rate changes.

<sup>\*\*</sup>Change in Company's premium level which will result from application of new rates.

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 7/1/2013 (3) (2) (1) Percent **Annual Premium** Change (+ or -)\*\* Volume (Illinois)\* Coverage **Automobile Liability Private** Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. **Burglary and Theft** 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 25.0% 2,383,496 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are revising the rate of the Connect product. Please see the filing memo for more details. \*Adjusted to reflect all prior rate changes. \*\*Change in Company's premium level which will result from application of new rates. Valley Forge Insurance Company Name of Company

DWAM SKL FCASMAAA AVPRACTUAL